

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

☐Check if different
than previously
reported. (ACC)

Madison

WI

53703

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00074450

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

02

01

2007

through

02

28

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Bill Johnson

Signature of Treasurer

Electronically Filed by Bill Johnson

Date

03

13

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		4485.41
(b) Cash on Hand at Beginning of Reporting Period	39052.14	
(c) Total Receipts (from Line 19)	125693.61	288256.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	164745.75	292741.44
7. Total Disbursements (from Line 31)	118153.96	246149.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46591.79	46591.79
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	27700.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M M
0 2D D
0 1Y Y Y Y
2 0 0 7

To:

M M
0 2D D
2 8Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	26000.00	66500.00
(i) Itemized (use Schedule A)	98424.00	212975.59
(ii) Unitemized	124424.00	279475.59
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	7500.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	124424.00	286975.59
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1269.61	1280.44
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	125693.61	288256.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	125693.61	288256.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	1858.77	5497.61
(i) Federal Share.....		
(ii) Non-Federal Share.....	6992.59	20681.51
(b) Other Federal Operating Expenditures.....	32313.37	80862.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	41164.73	107041.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	7000.00	7000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2500.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	2500.00	2500.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	67489.23	129607.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	67489.23	129607.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	118153.96	246149.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	111161.37	225468.14

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	124424.00	286975.59
34. Total Contribution Refunds (from Line 28(d))	2500.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	121924.00	284475.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34172.14	86360.46
37. Offsets to Operating Expenditures (from Line 15, page 3)	1269.61	1280.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32902.53	85080.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
William Barry
Mailing Address 15085 Bending Brae Ct

City State Zip Code
Brookfield WI 53005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Speed Systems, Inc

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.27791

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Lisa Buestrin
Mailing Address 1000 W Calumet Rd

City State Zip Code
River Hills WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.27792

Amount of Each Receipt this Period

1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
James Callan
Mailing Address 1711 E Dean Rd

City State Zip Code
Milwaukee WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
James L Callan Inc

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.27793

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Michael Cudahy

Mailing Address 9100 N Swan Rd

City State Zip Code
Milwaukee WI 53224

FEC ID number of contributing
federal political committee.

C

Name of Employer
The edeavors Group, LLC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.27796

Amount of Each Receipt this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)

David Drumel

Mailing Address N82 W23548 Pitching Wedge Ct

City State Zip Code
Sussex WI 53089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Good Electric

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.27789

Amount of Each Receipt this Period

250.00

Best Efforts Compliance

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)

Thomas Farrell

Mailing Address 323 S Beaumont Rd

City State Zip Code
Prairie Du Chien WI 53821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peoples State Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.27856

Amount of Each Receipt this Period

500.00

Best Efforts Compliance

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Richard Fischer
Mailing Address 9517 N. Wakefield Ct

City State Zip Code
Milwaukee WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Fin. Cons.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.27797

Amount of Each Receipt this Period

250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Dean Fitzgerald
Mailing Address 3205 W County Line Rd

City State Zip Code
Milwaukee WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capitol Service Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.27800

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Vincent Fonti
Mailing Address 1749 Buckhorn Rd

City State Zip Code
Woodruff WI 54568-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boston Inc. & Furniture

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.27802

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) James Fritz Mailing Address 3551 Scenic Vista Ct City Waterford State WI Zip Code 53185-4739 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 28 / 2007 Transaction ID: SA11A1.27803 Amount of Each Receipt this Period 500.00 Contribution
B. Full Name (Last, First, Middle Initial) Phillip Gelatt Mailing Address 450 Losey Court Lane City La Crosse State WI Zip Code 54601 FEC ID number of contributing federal political committee. C Name of Employer Northern Engraving Corp Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 02 / 20 / 2007 Transaction ID: SA11A1.27805 Amount of Each Receipt this Period 5000.00 Contribution
C. Full Name (Last, First, Middle Initial) Jo Ann Greb Mailing Address 8861 W wilson Bay Dr City Hayward State WI Zip Code 54843 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 02 / 26 / 2007 Transaction ID: SA11A1.27807 Amount of Each Receipt this Period 250.00 Contribution

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Jay Hamann
Mailing Address 558 Pinehurst Avenue

City State Zip Code
Green Bay WI 54302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.27808

Amount of Each Receipt this Period

250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Thomas Hauske
Mailing Address 4664 Fontana Beach Rd.

City State Zip Code
West Bend WI 53095

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.27810

Amount of Each Receipt this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Robert Hegwood
Mailing Address S79 W36855 Wilton Road

City State Zip Code
Eagle WI 53119

FEC ID number of contributing
federal political committee.

C

Name of Employer
CCI

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.27811

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Dennis Heyde			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7	
Mailing Address 7539 161st Street			Transaction ID: SA11A1.27813	
City State Zip Code Chippewa Falls WI 53729		Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer Heyde Health		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) Cynthia Johnson			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 2578 24th St			Transaction ID: SA11A1.27815	
City State Zip Code Rice Lake WI 54868		Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer N/A		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
C. Full Name (Last, First, Middle Initial) Christopher Magiera			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7	
Mailing Address 1506 Pine View Ln			Transaction ID: SA11A1.27817	
City State Zip Code Wausau WI 54403		Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Contribution		
Name of Employer GI Associates SC		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Nicholas May
Mailing Address 3102 Old Gate Road, #A

City State Zip Code
Madison WI 53704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refrigeration Systems, In-
c.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.27818

Amount of Each Receipt this Period

250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Michael Nelms
Mailing Address 1129 26 3/4th Ave

City State Zip Code
Cumberland WI 54829

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Flight Instructor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.27819

Amount of Each Receipt this Period

250.00

Contribution

C. Full Name (Last, First, Middle Initial)
William Ross
Mailing Address PO Box 435

City State Zip Code
Shawno WI 54166-0435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ross Carbide & Supply

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.27821

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Terence Schmahl

Mailing Address 1925 West Dean Road

City State Zip Code
 River Hills WI 53217

FEC ID number of contributing
federal political committee.

C

Name of Employer
M W Hsi

Occupation
Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 6 / 2 0 0 7

Transaction ID: SA11A1.27822

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Frederick Schwertfeger

Mailing Address 13020 Oriole Lane

City State Zip Code
 Brookfield WI 53005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horicon State Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.27825

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Frederick Schwertfeger

Mailing Address 13020 Oriole Lane

City State Zip Code
 Brookfield WI 53005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horicon State Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.27826

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Joe Sensenbrenner

Mailing Address 114 Limeklin Dr

City State Zip Code
Neenah WI 54956

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.27827

Amount of Each Receipt this Period

500.00

Contribution

B. Full Name (Last, First, Middle Initial)

Brett Smith

Mailing Address 3308 Emerald Valley Drive

City State Zip Code
Onalaska WI 54650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.27828

Amount of Each Receipt this Period

250.00

Contribution

C. Full Name (Last, First, Middle Initial)

Lloyd Smith

Mailing Address 1629 W Pinewood Ct

City State Zip Code
Mequon WI 53092

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.27829

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Rita Stilin Mailing Address 72303 Pufal Rd City High Bridge State WI Zip Code 54846 FEC ID number of contributing federal political committee. C Name of Employer North Country Lumber Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Transaction ID: SA11A1.27837 Amount of Each Receipt this Period 300.00 Contribution
B. Full Name (Last, First, Middle Initial) Rita Stilin Mailing Address 72303 Pufal Rd City High Bridge State WI Zip Code 54846 FEC ID number of contributing federal political committee. C Name of Employer North Country Lumber Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7 Transaction ID: SA11A1.27838 Amount of Each Receipt this Period 100.00 Contribution
C. Full Name (Last, First, Middle Initial) Janice Tipple Mailing Address 4010 Shadows Court City De Forest State WI Zip Code 53532 FEC ID number of contributing federal political committee. C Name of Employer GI Office Tech Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 7 Transaction ID: SA11A1.27843 Amount of Each Receipt this Period 500.00 Contribution

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Margaret Van Alstyne

Mailing Address 3423 Sunset Dr

City State Zip Code
 Madison WI 53705

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.27844

Amount of Each Receipt this Period

500.00

Contribution

B. Full Name (Last, First, Middle Initial)
James Villa

Mailing Address 1331 S 93rd St

City State Zip Code
 Milwaukee WI 53214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Milwaukee County

Occupation
Chief of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.27790

Amount of Each Receipt this Period

500.00

Best Efforts Compliance

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

26000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 52

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Sherry Schultz Mailing Address 1418 Pleasure Drive City Madison State WI Zip Code 53704 FEC ID number of contributing federal political committee. C Name of Employer RPW Occupation Coordinator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 305.53		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7 Transaction ID: SA15.27824 Amount of Each Receipt this Period 305.53 COBRA reimbursement
B. Full Name (Last, First, Middle Initial) WE Energies Mailing Address 231 W Michigan Street City Milwaukee State WI Zip Code 53203 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 725.79		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7 Transaction ID: SA15.27850 Amount of Each Receipt this Period 725.79 Refund - overpayment of utility bill
C. Full Name (Last, First, Middle Initial) WE Energies Mailing Address 231 W Michigan Street City Milwaukee State WI Zip Code 53203 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 964.08		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 7 Transaction ID: SA15.27851 Amount of Each Receipt this Period 238.29 Refund - overpayment of utilities

SUBTOTAL of Receipts This Page (optional)

1269.61

TOTAL This Period (last page this line number only)

1269.61

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Advantage

Mailing Address 1611 N. Kent Street, STE 905

City State Zip Code
Arlington VA 22209

Purpose of Disbursement
GOTV calls

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27959

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1268.94

B. APC

Full Name (Last, First, Middle Initial)

Mailing Address 6470 East Johns Crossing Suite 100

City State Zip Code
Duluth GA 30097

Purpose of Disbursement
Conference calls

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27896

Date of Disbursement

/ /

Amount of Each Disbursement this Period

126.63

C. City of Madison Treasurer

Full Name (Last, First, Middle Initial)

Mailing Address 215 Martin Luther King Blvd

City State Zip Code
Madison WI 53701

Purpose of Disbursement
Personal property taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27927

Date of Disbursement

/ /

Amount of Each Disbursement this Period

155.99

SUBTOTAL of Disbursements This Page (optional)

1551.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Expedia

Mailing Address 3150 139th Avenue SE

City Bellvue State WA Zip Code 98005

Purpose of Disbursement

Travel service fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27906

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2007

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

B. Globalwide Gifts

Mailing Address PO Box 346

City Jordan State NY Zip Code 13080

Purpose of Disbursement
Crystal elephant refund to CC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27905

Date of Disbursement

MM / DD / YYYY
12 / 28 / 2006

Amount of Each Disbursement this Period

-11.86

[MEMO ITEM]

C. Great Dane Brewery

Mailing Address 123 E Doty St

City Madison State WI Zip Code 53703

Purpose of Disbursement
Staff lunch

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27912

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2007

Amount of Each Disbursement this Period

75.89

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Terry Kohler

Mailing Address 630 Riverfront Drive

City Sheboygan State WI Zip Code 53082

Purpose of Disbursement
Flight reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27961

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

2595.00

Full Name (Last, First, Middle Initial)

B. M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
CC late fee/finance charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27908

Date of Disbursement

01 / 10 / 2007

Amount of Each Disbursement this Period

48.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27903

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

753.36

SUBTOTAL of Disbursements This Page (optional)

3348.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin		Transaction ID: SB21B.27871 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 4 / 2 0 0 7</div> </div>
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period <div>221.87</div>
City Madison State WI Zip Code 53705		
Purpose of Disbursement Bank fee	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin		Transaction ID: SB21B.27962 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 4 / 2 0 0 7</div> </div>
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period <div>5.00</div>
City Madison State WI Zip Code 53705		
Purpose of Disbursement Bank fee	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) M&I Merchant Services		Transaction ID: SB21B.27869 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 2 / 2 0 0 7</div> </div>
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period <div>480.20</div>
City Madison State WI Zip Code 53705		
Purpose of Disbursement Credit card processing fees	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

707.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. M&I Merchant Services

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement
credit card processing fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27960

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

12.95

Full Name (Last, First, Middle Initial)

B. Madison Concourse Hotel

Mailing Address 1 West Dayton Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Staff refreshments

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27910

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

42.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Milwaukee Athletic Club

Mailing Address 411 E Wisconsin Ave Ste 600

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement
Finance committee meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27913

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

1053.37

SUBTOTAL of Disbursements This Page (optional)

1066.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Northwest Airlines

Mailing Address 1 Northwest Rd

City Livonia State MI Zip Code 48152-3938

Purpose of Disbursement

Staff airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27907

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

256.61

[MEMO ITEM]

B. Northwest Airlines

Mailing Address 1 Northwest Rd

City Livonia State MI Zip Code 48152-3938

Purpose of Disbursement

Staff airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27909

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

256.61

[MEMO ITEM]

C. Paypal, Inc.

Mailing Address #774100, 4100 Solutions Center

City Chicago State IL Zip Code 60677-4001

Purpose of Disbursement

Credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27904

Date of Disbursement

12 / 16 / 2006

Amount of Each Disbursement this Period

19.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Scott Poole

Mailing Address 445 West Gilman #202

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27952

Date of Disbursement

/ /

Amount of Each Disbursement this Period

498.25

Full Name (Last, First, Middle Initial)

B. PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
Business reply mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27865

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PostMaster

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement
Business reply mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27930

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2498.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Unisource Direct

Mailing Address 925 Harrington Drive

City Madison State WI Zip Code 53718

Purpose of Disbursement
Financel mailing postage - not FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27866

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

2175.00

B. Unisource Direct

Mailing Address 925 Harrington Drive

City Madison State WI Zip Code 53718

Purpose of Disbursement
Finance mailing - not FEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27918

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

20000.00

C. Walmart

Mailing Address 4198 Nakoosa Trail

City Madison State WI Zip Code 53714

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27911

Date of Disbursement

01 / 04 / 2007

Amount of Each Disbursement this Period

54.98

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

22175.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Wisc. Dept of Revenue - Sls Tax

Mailing Address PO Box 93389

City
Milwaukee

State
WI

Zip Code
53293

Purpose of Disbursement
Sales/Use tax

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27928

Date of Disbursement

/ /

Amount of Each Disbursement this Period

681.69

SUBTOTAL of Disbursements This Page (optional)

681.69

TOTAL This Period (last page this line number only)

32028.25

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City
Madison

State
WI

Zip Code
53705

Purpose of Disbursement
Payment on LOC Principal

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB26.27925

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

Amount of Each Disbursement this Period

7000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

7000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Oneida Tribe of Indians

Mailing Address PO Box 365

City
Oneida

State
WI

Zip Code
54155

Purpose of Disbursement
Refund of amt over contribution limit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.27963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Employee Simple IRA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.27893

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1309.68

B. American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Employee Simple IRA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.27934

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1160.37

C. American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Employee Simple IRA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB30B.27935

Date of Disbursement

/ /

Amount of Each Disbursement this Period

248.77

SUBTOTAL of Disbursements This Page (optional)

2718.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Dudley Bowlby

Mailing Address 250 Femrite Drive

City Madison State WI Zip Code 53716

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27881

Date of Disbursement

/ /

Amount of Each Disbursement this Period

913.30

Full Name (Last, First, Middle Initial)

B. Dudley Bowlby

Mailing Address 250 Femrite Drive

City Madison State WI Zip Code 53716

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27946

Date of Disbursement

/ /

Amount of Each Disbursement this Period

581.08

Full Name (Last, First, Middle Initial)

C. Norman Dawson

Mailing Address PO Box 698

City Wycena State WI Zip Code 53969

Purpose of Disbursement
Payroll garnishment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

154.13

SUBTOTAL of Disbursements This Page (optional)

1648.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Norman Dawson		Transaction ID: SB30B.27936 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address PO Box 698		Amount of Each Disbursement this Period <div>75.99</div>	
City Wyocena	State WI		Zip Code 53969
Purpose of Disbursement Payroll garnishment			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Dean Care		Transaction ID: SB30B.27931 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 7</div> </div>	
Mailing Address PO Box 88610		Amount of Each Disbursement this Period <div>7346.70</div>	
City Milwaukee	State WI		Zip Code 53288
Purpose of Disbursement Health insurance			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Richard Dickie		Transaction ID: SB30B.27882 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>	
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period <div>1226.74</div>	
City Madison	State WI		Zip Code 53703
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

8649.43

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Richard Dickie		Transaction ID: SB30B.27947 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period <div>1149.96</div>
City Madison State WI Zip Code 53703	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Jason Gammeter		Transaction ID: SB30B.27883 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period <div>616.54</div>
City Wycena State WI Zip Code 53969	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Jason Gammeter		Transaction ID: SB30B.27948 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period <div>303.98</div>
City Wycena State WI Zip Code 53969	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

2070.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Guardian Full Name (Last, First, Middle Initial) Mailing Address PO Box 95101 City Chicago State IL Zip Code 60694 Purpose of Disbursement Dental insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.27929 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7 Amount of Each Disbursement this Period 1556.41
B. Donna Heimbach Full Name (Last, First, Middle Initial) Mailing Address 3002 Dianne Drive City Middleton State WI Zip Code 53562 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.27884 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 1064.79
C. Donna Heimbach Full Name (Last, First, Middle Initial) Mailing Address 3002 Dianne Drive City Middleton State WI Zip Code 53562 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.27949 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7 Amount of Each Disbursement this Period 498.31

SUBTOTAL of Disbursements This Page (optional)

3119.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. IRS Full Name (Last, First, Middle Initial) Mailing Address Payment Center City State Zip Code Kansas City MO 64999 Purpose of Disbursement Payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.27891 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 7098.16
B. IRS Full Name (Last, First, Middle Initial) Mailing Address Payment Center City State Zip Code Kansas City MO 64999 Purpose of Disbursement Payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.27957 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7 Amount of Each Disbursement this Period 6755.72
C. Mark Jefferson Full Name (Last, First, Middle Initial) Mailing Address 1678 Cottonville Avenue City State Zip Code Arkdale WI 54613 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB30B.27872 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 948.49
SUBTOTAL of Disbursements This Page (optional) ▶		14802.37
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Mark Jefferson

Mailing Address 1678 Cottonville Avenue

City Arkdale State WI Zip Code 54613

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27937

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2143.54

Full Name (Last, First, Middle Initial)

B. Juston Johnson

Mailing Address 820 Williamson Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27873

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1309.11

Full Name (Last, First, Middle Initial)

C. Juston Johnson

Mailing Address 820 Williamson Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27938

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1407.93

SUBTOTAL of Disbursements This Page (optional)

4860.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Kimberly Jorns		Transaction ID: SB30B.27874 Date of Disbursement <div> <div>MM / DD / YY</div> <div>02 / 15 / 2007</div> </div>	
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period <div>1732.02</div>	
City De Pere State WI Zip Code 54115	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Kimberly Jorns		Transaction ID: SB30B.27939 Date of Disbursement <div> <div>MM / DD / YY</div> <div>02 / 28 / 2007</div> </div>	
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period <div>1657.39</div>	
City De Pere State WI Zip Code 54115	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Brian Kind		Transaction ID: SB30B.27875 Date of Disbursement <div> <div>MM / DD / YY</div> <div>02 / 15 / 2007</div> </div>	
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period <div>1706.24</div>	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

5095.65

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Brian Kind		Transaction ID: SB30B.27940 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period <div>1650.95</div>
City Madison State WI Zip Code 53711		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Kirsten Kukowski		Transaction ID: SB30B.27876 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 3029 Maple Valley Drive #201		Amount of Each Disbursement this Period <div>1100.44</div>
City Madison State WI Zip Code 53719		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Kirsten Kukowski		Transaction ID: SB30B.27941 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 3029 Maple Valley Drive #201		Amount of Each Disbursement this Period <div>1127.62</div>
City Madison State WI Zip Code 53719		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

3879.01

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Larry Loomis		Transaction ID: SB30B.27885 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period <div>589.93</div>
City Madison State WI Zip Code 53719	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Larry Loomis		Transaction ID: SB30B.27950 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period <div>360.71</div>
City Madison State WI Zip Code 53719	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Ryan Mahoney		Transaction ID: SB30B.27877 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period <div>255.86</div>
City Bethesda State MD Zip Code 20817	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1206.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Ryan Mahoney

Mailing Address 7608 Hamilton Spring Rd

City Bethesda State MD Zip Code 20817

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27942

Date of Disbursement

/ /

Amount of Each Disbursement this Period

209.21

Full Name (Last, First, Middle Initial)

B. Kathryn Mize

Mailing Address 414 N Livingston Street #2

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1726.71

Full Name (Last, First, Middle Initial)

C. Kathryn Mize

Mailing Address 414 N Livingston Street #2

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.27943

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1772.48

SUBTOTAL of Disbursements This Page (optional)

3708.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Jeffery Noltner		Transaction ID: SB30B.27886 Date of Disbursement <div> <div>02</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period <div>197.53</div>	
City Madison	State WI		Zip Code 53718
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Jeffery Noltner		Transaction ID: SB30B.27951 Date of Disbursement <div> <div>02</div> <div>28</div> <div>2007</div> </div>	
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period <div>101.31</div>	
City Madison	State WI		Zip Code 53718
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Sherrie Osegard		Transaction ID: SB30B.27879 Date of Disbursement <div> <div>02</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period <div>970.76</div>	
City Madison	State WI		Zip Code 53719
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

1269.60

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Sherrie Osegard		Transaction ID: SB30B.27944 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>	
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period <div>970.75</div>	
City Madison State WI Zip Code 53719	Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Scott Poole		Transaction ID: SB30B.27887 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>	
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period <div>743.06</div>	
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Karoline Rezin		Transaction ID: SB30B.27880 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>	
Mailing Address 1836 Gruman		Amount of Each Disbursement this Period <div>270.12</div>	
City Tomah State WI Zip Code 54660	Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1983.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Karoline Rezin		Transaction ID: SB30B.27945 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>	
Mailing Address 1836 Gruman		Amount of Each Disbursement this Period <div>131.60</div>	
City Tomah	State WI		Zip Code 54660
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) James Sanders		Transaction ID: SB30B.27888 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>	
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period <div>621.11</div>	
City Madison	State WI		Zip Code 53704
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) James Sanders		Transaction ID: SB30B.27954 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>	
Mailing Address 4510 Texas Trail		Amount of Each Disbursement this Period <div>357.25</div>	
City Madison	State WI		Zip Code 53704
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1109.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Charles Triller		Transaction ID: SB30B.27889 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 609 East Gorham St #14		Amount of Each Disbursement this Period <div>787.38</div>
City Madison State WI Zip Code 53703	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Charles Triller		Transaction ID: SB30B.27955 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 609 East Gorham St #14		Amount of Each Disbursement this Period <div>426.90</div>
City Madison State WI Zip Code 53703	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Rick Wiley		Transaction ID: SB30B.27858 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 7</div> </div>
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period <div>2094.59</div>
City Madison State WI Zip Code 53718	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

3308.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Rick Wiley		Transaction ID: SB30B.27863 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 7</div> </div>
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period <div>2094.58</div>
City Madison State WI Zip Code 53718		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Rick Wiley		Transaction ID: SB30B.27864 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 7</div> </div>
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period <div>2094.58</div>
City Madison State WI Zip Code 53718		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Joshua Wilson		Transaction ID: SB30B.27890 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period <div>680.56</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>4869.72</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Joshua Wilson		Transaction ID: SB30B.27956 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period <div>439.98</div>
City Madison State WI Zip Code 53703	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue		Transaction ID: SB30B.27892 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address PO Box 93208		Amount of Each Disbursement this Period <div>1442.90</div>
City Milwaukee State WI Zip Code 53293	<div>Category/Type</div>	
Purpose of Disbursement Payroll tax		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue		Transaction ID: SB30B.27958 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address PO Box 93208		Amount of Each Disbursement this Period <div>1305.01</div>
City Milwaukee State WI Zip Code 53293	<div>Category/Type</div>	
Purpose of Disbursement Payroll tax		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>3187.89</div>
TOTAL This Period (last page this line number only)		<div>67489.23</div>

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

LOAN SOURCE Full Name (Last, First, Middle Initial)

M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison

State WI

ZIP Code

53705

Election:

☐ Primary☐ General☐ Other (specify) ▼

Original Amount of Loan

110000.00

Cumulative Payment To Date

106000.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
0 9Y Y Y Y
2 0 0 2

04/30/02

5.75 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

4000.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 47 / 52

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

LOAN SOURCE Full Name (Last, First, Middle Initial)

M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison

State WI

ZIP Code 53705

Election:

☐ Primary☐ General☐ Other (specify) ▼

Original Amount of Loan

34000.00

Cumulative Payment To Date

10300.00

Balance Outstanding at Close of This Period

23700.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 2D D
3 1Y Y Y Y
2 0 0 3

5.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

23700.00

TOTALS This Period (last page in this line only) ▶

27700.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 / 52

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
 AT&T

Mailing Address

PO Box 9001309

City

State

Zip Code

Louisville

KY

40290-1309

Purpose of Disbursement:
 Local phone service

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17823.29

Date / /

Transaction ID: H4.27897

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

104.06

391.47

495.53

B. Full Name (Last, First, Middle Initial)
 AT&T

Mailing Address

PO Box 9001309

City

State

Zip Code

Louisville

KY

40290-1309

Purpose of Disbursement:
 Long distance phone charges

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19508.73

Date / /

Transaction ID: H4.27898

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

353.94

1331.50

1685.44

C. Full Name (Last, First, Middle Initial)
 Earthscapes

Mailing Address

PO Box 683

City

State

Zip Code

Marshall

WI

53559

Purpose of Disbursement:
 Snow removal

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19803.73

Date / /

Transaction ID: H4.27899

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

61.95

233.05

295.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

519.95

1956.02

2475.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 49 / 52

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)

GFC Leasing

Mailing Address

PO Box 1129

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:
Copier leaseCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20370.03

Date

M	M
0	2

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.27901

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

118.92

447.38

566.30

B. Full Name (Last, First, Middle Initial)

Gordon Flesch Company

Mailing Address

PO Box 992

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:
Copier tonerCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20601.23

Date

M	M
0	2

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.27902

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

48.55

182.65

231.20

C. Full Name (Last, First, Middle Initial)

Neenah Springs

Mailing Address

PO Box 9

City	State	Zip Code
Oxford	WI	53952

Purpose of Disbursement:
Bottled waterCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20659.27

Date

M	M
0	2

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.27914

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.19

45.85

58.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

179.66

675.88

855.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 50 / 52

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)

Pitney Bowes Credit Corp

Mailing Address

PO Box 85460

City State Zip Code

Louisville KY 40285

Purpose of Disbursement:
Postage meter postageCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22159.27

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	7

Transaction ID: H4.27915

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

315.00

1185.00

1500.00

B. Full Name (Last, First, Middle Initial)

Pro One Janitorial Inc

Mailing Address

1486 Kenwood Center

City State Zip Code

Menasha WI 54952

Purpose of Disbursement:
Janitorial servicesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22659.27

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	7

Transaction ID: H4.27916

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.00

395.00

500.00

C. Full Name (Last, First, Middle Initial)

Waste Management

Mailing Address

PO Box 9001505

City State Zip Code

Louisville KY 40290

Purpose of Disbursement:
Waste removalCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

22766.41

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	7

Transaction ID: H4.27919

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.50

84.64

107.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

442.50

1664.64

2107.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 51 / 52
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
West Bend Mutual Insurance

Mailing Address

1900 South 18th Ave

City	State	Zip Code
West Bent	WI	53095

Purpose of Disbursement:
Building Insurance

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25909.91

Date

M	M
0	2

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.27922

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
660.13		2483.37		3143.50

B. Full Name (Last, First, Middle Initial)
ITS Pay My Bill

Mailing Address

7720 Rivers Edge Drive

City	State	Zip Code
Columbus	OH	43235

Purpose of Disbursement:
Field office TDS telephone bill

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

26179.12

Date

M	M
0	2

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.27932

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.53		212.68		269.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
716.66		2696.05		3412.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1858.77	6992.59	8851.36

Image# 27930262994

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit
